

APPLICATION AS FILED - PART I

(Column 1)

(Column 2)

FOR	NUMBER FILED	NUMBER EXTRA
BIG FEE OFR 1.16(e), (f), or (g))		
ARCH FEE OFR 1.16(k), (l), or (m))		
MINIATURE FEE OFR 1.16(o), (p), or (q))		
ADDITIONAL CLAIMS OFR 1.16(i))	minus 20 =	
DEPENDENT CLAIMS OFR 1.16(h))	minus 8 =	
APPLICATION SIZE FR 1.16(e))	If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(e).	
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(i))		

IPLE DEPENDENT OLAIM PRESENT (97 OFR 1.160))

difference in column 1 is less than zero, enter "0" in column 2.

APPLICATION AS AMENDED - PART II

(Column 1)		(Column 2)		(Column 3)
	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total OFR 1.16(i)	20	Minus	20	=
dependent OFR 1.16(ii)	3	Minus	3	= 2
Application Size Fee (37 OFR 1.16(e))				
BT PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 OFR 1.16(i))				

Application Size Fee (37 CFR 1.16(f))

**PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.160)**

(Column 1)		(Column 2)		(Column 3)
CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR		PRESENT EXTRA
Total 1.16(1)		Minus		=
Amount 1.16(4)		Minus		=
ation Size Fee (37 CFR 1.16(e))				
PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(f)).				

ation Size Fee (97 OPR 1.16(6))

PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))

SMALL ENTITY	
RATE (\$)	FEE (\$)
X	
X	
TOTAL	

**TOTAL**

OTHER THAN SMALL ENTITY	
RATE (\$)	FEE (\$)
X	
X	
TOTAL	

TOTAI

SMALL ENTITY	
RATE (\$)	ADDITIONAL FEE (\$)
X 25	
X 100	
X 180	
TOTAL ADD'L FEE	

TOTAL  
ADD'L FEE

OTHER THAN SMALL ENTITY	
RATE (\$)	ADDITIONAL FEE (\$)
x 50 =	}
x 200 =	
360	
TOTAL ADD'L FEE	

TOTAL  
ADD'L FEE

RATE (\$)		ADDITIONAL FEE (\$)
X	1	
X	1	
TOTAL ADD'L FEE		

TOTAL  
ADD'L FEE

	RATE (\$)	ADDITIONAL FEE (\$)
OR	X	=
OR	X	=
OR		
OR	TOTAL ADD'L FEE	

TOTAL  
ADD'L FEE

If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

Highest Number Previously Paid For\* IN THIS SPACE is less than 20, enter "20".

highest Number Previously Paid For\* IN THIS SPACE Is less than 20, enter "2"  
highest Number Previously Paid For\* (Total of Independent Contractors) Is less than 8, enter "3"

of Information is required by 37 CFR 1.16. The Information is required to obtain an application. Information is required to obtain

ing, preparing, and submitting the completed application. The information is required to obtain or retain a benefit by the public which is to file (and by the

ing, preparing, and submitting the completed application form to the USPTO. This collection is estimated to take 12 minutes to complete. Time will vary depending upon the individual case. Any comments

**ID TO:** Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.